PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/588194

| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER | • | |
|---|--|---|--|--------------------------------|----------------------|--------------------------------|-----|---------------------|------------------------|------|-------------------------|------------------------|--|
| | | · · · · · · · · · · · · · · · · · · · | (Column | 1 1) | ((| Column 2) |] f | | <u> </u> | | | | |
| U.S. NATIONAL STAGE FEES | | | | | | | | RATE | · FEE | | RATE | FEE | |
| BASI | IC FEE | | SMALL ENT. | = \$ 150 | LARGE ENT. = \$ 300 | | | BASIC FEE | · | OR | BASIC FEE | 300 | |
| EXAMINATION FEE | | | Satisfies PCT Ar (4) = \$50 / | | | her situations = 100 / \$ 200 | | EXAM. FEE | · | | EXAM. FEE | 200 | |
| SEARCH FEE | | | U.S. is ISA = \$ ALL other cou \$ 200 / \$ | intries = | | ther situations = 250 / \$ 500 | | SEARCH FEE. | · | | SEARCH FEE | 400 | |
| FEE FOR EXTRA SPEC. PGS. | | | minu | us 100 = | | / 50 = | | X \$ 125 = | | | .X \$ 250 = | | |
| TOT | AL CHARGEAB | LE CLAIMS | 15 mir | nus 20 = | * | | | X \$ 25 = | | OR | X \$ 50 = | | |
| INDE | EPENDENT CLA | NMS | A m | inus 3 = | * | | | X \$ 100 = | | OR | X \$ 200 = | | |
| MUL | TIPLE DEPEND | DENT CLAIM PRE | ESENT | | | | | + \$ 180 = | | OR | + \$ 360 = | · | |
| * If | the difference | in column 1 is l | ess than zero | , enter "0 | " in co | lumn 2 | | TOTAL | | OR | TOTAL | 900 | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | , , | SMALL ENTITY | | | OTHER THAN SMALL ENTITY | | |
| IT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | BER . DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| OMEN | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| AMENDMENT | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | .+ \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | • | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| | , | ··· (Column ₋ 1) | · · . | (Colur | າກ 2) | (Column 3) | • | | | | · 🙉 | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | IEST BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | | |
| | Independent | * | Minus | *** | , | = | | X \$ 100 = | | OR | X \$ 200 = | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | | |
| | | | | | | | - ' | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | |
| | | | | | | | | · · | | | ÷. | | |
| | | | | | , | | | | | | | | |

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.